

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 09/24/2007
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 095034	(X2) MULTIPLE CONSTRUCTION A. BUILDING 01 - MAIN BUILDING 01 B. WING _____	(X3) DATE SURVEY COMPLETED 09/11/2007
NAME OF PROVIDER OR SUPPLIER CARROLL MANOR NURSING & REHAB			STREET ADDRESS, CITY, STATE, ZIP CODE 725 BUCHANAN ST., NE WASHINGTON, DC 20017	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
K 018	Continued From page 1 Basement-Entrance doors to the main laundry, main kitchen, cafeteria and laundry presser area in four (4) of six (6) fire doors observed at 10:15 AM on September 11, 2007. Second Floor- Double and single doors near rooms 221 and the charting room in two (2) of eight (8) fire doors observed at 11:30 PM on September 11, 2007. Fourth Floor-Employee lounge and soiled utility room doors in two (2) of six (6) fire doors observed at 12:30 PM on September 11, 2007. Employees #13 and 15 acknowledged these findings at the time of these observations.	K 018	NFPA 101 Life Safety Code Standard 1.) Repairs were made to main laundry, main kitchen, cafeteria, laundry presser area, second floor double and single doors near room 221, charting room and fourth floor employee lounge and soiled utility room doors. 2.) All areas were inspected. 3.) The inspection of these areas will be added to the monthly rounds list and monitored by the Maintenance Manager. 4.) The findings of the monthly rounds will be presented at the Quarterly QA meeting.	10/22/2007 9/11/2007 10/22/2007 On-going
K 045 SS=E	NFPA 101 LIFE SAFETY CODE STANDARD Illumination of means of egress, including exit discharge, is arranged so that failure of any single lighting fixture (bulb) will not leave the area in darkness. (This does not refer to emergency lighting in accordance with section 7.8.) 19.2.8 This STANDARD is not met as evidenced by: Based on observations during the Life Safety Code inspection, it was determined lighting fixtures failed to illuminate the stairwells to provide lighting in the event of a fire. These observations were made in the presence of Employees #13 and 15. The findings include: Basement- Stairwell lighting fixtures near the elevator in the basement at the top and bottom	K 045	NFPA 101 Life Safety Code Standard 1.) The light fixtures were replaced. 2.) All light fixtures were inspected and replaced as needed. 3.) The stairwell lighting has been included on the monthly rounds list. 4.) The findings of the monthly rounds will be presented at the Quarterly QA meeting.	9/11/2007 9/12/2007 9/12/2007 On-going

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K 045	<p>Continued From page 2</p> <p>landings on the west side in two (2) of six (6) lighting fixtures observed at 10:40 AM on September 11, 2007.</p> <p>First Floor-A single lamp lighting fixture located at the bottom landing of west side stairwell #1 in one (1) of two (2) lighting fixtures observed at 11:00 AM on September 11, 2007.</p> <p>Second Floor-Single lamp lighting at the bottom of stairwells #3 and #4 north and west sides failed to illuminate in one (1) of two (2) lighting fixtures observed at 11:30 AM on September 11, 2007.</p> <p>Third Floor-A single lamp lighting fixture at the bottom landing of stairwell #3 west side in one (1) of two (2) lighting fixtures observed at 1:05 PM on September 11, 2007.</p> <p>Fourth Floor-A single lamp lighting fixture at the bottom and top landings of stairwell #4 north side in two (2) of two (2) lighting fixtures observed at 12:30 PM on September 11, 2007.</p> <p>Fifth Floor-A single lamp lighting fixture at the bottom landing of stairwell #5 in one (1) of two (2) lighting fixtures observed at 12:55 PM on September 11, 2007.</p> <p>Employees #13 and 15 acknowledged the findings at the time of these observations.</p>	K 045		
K 052 SS=E	<p>NFPA 101 LIFE SAFETY CODE STANDARD</p> <p>A fire alarm system required for life safety is installed, tested, and maintained in accordance with NFPA 70 National Electrical Code and NFPA 72. The system has an approved maintenance and testing program complying with applicable requirements of NFPA 70 and 72. 9.6.1.4</p>	K 052		

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K 052	Continued From page 3 This STANDARD is not met as evidenced by: Based on record review during the Life Safety Code inspection, it was determined that fire alarm devices were not tested on a quarterly basis. This observations was made in the presence of Employees #13 and 15. The findings include: Documentation was not available to support testing of the complete fire alarm system on a quarterly basis. The last documented test was conducted on the alarm devices on July 7, 2007. There was no documented evidence that alarm device testing was conducted during the fourth (4th) quarter of 2006 or the first (1st) and second (2nd) quarters of 2007 in three (3) of four (4) quarters reviewed on September 11, 2007 at 8:40 AM. Employees #13 and 15 acknowledged this finding at the time of this observation.	K 052	NFPA 101 Life Safety Code Standard 1.)The documentation requested during the survey was located in the Hospital Maintenance department The documentation indicates sprinkler system testing was completed on January 20, 2007, April 19 and July 10th, 2007. 2.) Maintenance has the next quarterly inspection shceduled in October 2007 by Virginia Sprinkler. Inspection files will be maintained in the Carroll Manor Maintenance office. 3.) The Life Safety Officer will monitor performance quarterly. 4.) The Life Safety Officer will report testing and monitoring results to the Administrator quarterly at QI Meeting.	10/1/2007 10/28/2007 10/28/2007 10/28/2007